Express Mail No.: EV284452728US

APPLICATION DATA SHEET

Application Information

Application number:: To be assigned

Filing Date:: June 23, 2003

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD disks::

Number of copies of CDs::

Sequence submission?:: Yes

Computer Readable Form (CRF)?:: Yes

Number of copies of CRF:: 3

Title :: METHODS AND NUCLEIC ACIDS FOR

ANALYSES OF COLORECTAL CELL

PROLIFERATIVE DISORDERS

Attorney Docket Number:: 47675-47

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 52

Small Entity?:: Yes

Petition included?::

Petition Type::

Licensed U.S. Gov't Agency:: No

Contract or Grant No:: None

Secrecy Order in Parent Appl.?:: No

First Applicant Information

Name Suffix::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full capacity

Given Name:: Cathy

Middle Name::

Family Name:: Lofton-Day

City of Residence:: Brier

State or Province of Residence:: WA

Country of Residence:: US

Street of mailing address:: 23908-35th Ave. W.

City of mailing address:: Brier

State or Province of mailing address:: WA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 98036

Second Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full capacity

Given Name:: Andrew

Middle Name::

Family Name:: Sledziewski

Name Suffix::

City of Residence:: Shoreline

State or Province of Residence:: WA

Country of Residence:: US

Street of mailing address:: 17736-15th Ave. NW

City of mailing address:: Shoreline

State or Province of mailing address:: WA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 98177

Third Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: DE

Status:: Full capacity

Given Name:: Jörn

Middle Name::

Family Name:: Lewin

Name Suffix::

City of Residence:: Berlin

State or Province of Residence::

Country of Residence:: DE

Street of mailing address:: Lützowufer 24

City of mailing address:: Berlin

State or Province of mailing address::

Country of mailing address:: DE

Postal or Zip Code of mailing address:: 10787

Fourth Applicant Information

Applicant Authority Type:: Inventor Primary Citizenship Country:: US Status:: **Full capacity** Given Name:: Fabian Middle Name:: Family Name:: Model Name Suffix:: Seattle City of Residence:: WA State or Province of Residence:: US Country of Residence:: Street of mailing address:: 734 Broadway Ave. E., Apt. 306 Seattle City of mailing address:: WA State or Province of mailing address:: US Country of mailing address:: 98102 Postal or Zip Code of mailing address:: Fifth Applicant Information Inventor Applicant Authority Type:: DE Primary Citizenship Country:: Full capacity Status:: Given Name:: Tamas Middle Name:: Family Name:: Rujan Name Suffix:: City of Residence:: Berlin State or Province of Residence::

Application	Johnnary Typo	, a.c.it ipplication.	Date::	
Domestic Priorit Application ::	y Information Continuity Type::	Parent Application::	Parent Filing	
Representative Customer Number::			22504	
Representative I	nformation			
E-Mail address::		barrydavison@dwt.co	<u>m</u>	
Fax Number:		206-628-7699		
Phone number::		206-628-7621		
Postal or Zip Code of mailing address::		98101-1688		
Country of mailing address::		US		
State or Province of mailing address::		WA		
City of mailing address::		Seattle		
Street of mailing address::		1501 Fourth Avenue,	Suite 2600	
Name::		Barry L. Davison		
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Correspondence	Information			
Postal or Zip Code of mailing address::		13189	13189	
Country of mailing	address::	DE		
State or Province	of mailing address::			
City of mailing address::		Berlin		
Street of mailing address::		Vinetastr. 7		
Country of Residence::				

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	